ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		January 12, 2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial	\$460,502	-1.7%	
Automobile Physical Damage	Ψ+00,002	1.7.7	
	> \$151,288	+7.9%	
3. Liability Other Than Auto			
Burglary and Theft			
5. Glass	· · · · · · · · · · · · · · · · · · ·		
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire	-		
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15 Other			
Line of Insurance			
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No	
	rates of an advisory organization, specify or		
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates.	nal Insurance Company	
	N	ame of Company	
	Brian W. Powers. C	Commercial Vehicle Product Mgr Official – Title	

SUMMARY SHEET

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial	17,372,000	0
2.	Automobile Physical Damage Private Passenger		
	Commercial	1,526,000	0
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	· · · · · · · · · · · · · · · · · · ·	-
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14. 15.	Crop Hail Other		
13.	Line of Insurance		
	ling only apply to certain territory (ter	rritories) or certain classes? If so, specif	îy:
Appli	es to all taxis written in the state of Ill	inois.	
We are	e not changing our filed rates from last	rates of an advisory organization, specific year. We are modifying some rules in cased on the individual risk characteristics.	our manual which may result in
** Cl	djusted to reflect all prior rate changes nange in Company's premium level whould from application of new rates.		
		<u>Am</u>	erican Country Insurance Co. Name of Company

Christine Gennett, Vice President,

Official - Title

Actuary

RECEIVED

DEC 1 8 2006

IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or rate	e level produced by rate revision effective	03/01/2007
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	\$575,756	-6.7 overall
2.	Automobile Physical Damage	\$373,730	-0.7 overan
۷.	Private Passenger		
	Commercial	\$320,156	-6.7 overall
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		erritories) or certain classes? If so, specify:	
All	territories, all classes		
Ado		rates of an advisory organization, specify of coverages and Rule Revisions as contained	
200	O-KZKLC and CA-2000-KZKI.		

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Sompo Japan Ins. Co. of America
Name of Company

Mary Alado, State Filings Analyst

Official - Title

SUMMARY SHEET

12-19-06

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	368, 857	-8.1%
2.	Automobile Physical Damage Private Passenger		
	Commercial	73,097	-8.1%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
).	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		***
١.	Crop Hail		
5.	Other		
	Line of Insurance		
_			
	iling only apply to certain territory (t	erritories) or certain classes? If so, spec	eify:
		s rates of an advisory organization, spec	ify organization):
ing	Organization: Insurance Services Of	ffice, Inc. (ISO)	

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR DEC 1 9 2006

SPRINGFIELD. ILLINOIS

SUA Insurance Company

Name of Company

Senior Counsel - Compliance Manager Official - Title

SUMMARY SHEET

レール	9-	06
-----	----	----

Chang	e in Company's premium or rate leve	el produced by rate revision effective	Earliest Date Upon Approval
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	368, 857	0.00%
2.	Automobile Physical Damage Private Passenger		
	Commercial	73,097	0.00%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Door f	iling only apply to cortain territory (territories) or certain classes? If so, speci	6
No.	ining only apply to certain territory (territories) or certain classes: 11 so, speci	iy.
. 10.			
D . C		s rates of an advisory organization, speci-	

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Rating Organization: Insurance Services Office, Inc. (ISO)

CA-2005-RLC01, Adoption of Loss Costs/Rules for Rule 95. Audio, Visual and Data Electronic Equipment Coverage for Division One - Automobile of the Commercial Line Manual (0% rate impact)

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



SUA Insurance Company
Name of Company

Senior Counsel – Compliance Manager
Official - Title

SUMMARY SHEET

			12-19-06
Chang	e in Company's premium or rate leve	l produced by rate revision effective	Earliest Date Upon Approval
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	368, 857	0.00%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	73,097	0.00%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		-
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f No.	iling only apply to certain territory (t	erritories) or certain classes? If so, speci	ify:
Rating	Organization: Insurance Services Of	s rates of an advisory organization, speci fice, Inc. (ISO) o Rule 97. Uninsured Motorists Insurance	

- * Adjusted to reflect all prior rate changes.* Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR DEC 1 9 2006 SPRINGFIELD, ILLINOIS SUA Insurance Company Name of Company

Senior Counsel - Compliance Manager Official - Title

SUMMARY SHEET

12-19-06

Change	e in Company's premium or rate level	produced by rate revision effective	Earliest Date Upon Approval
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage	368, 857	-5.1%
	Private Passenger Commercial	73,097	-5.1%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
No.			
Drinf d	agazintian of filing (If filing fallering	rates of an advisory organization, specify	ozzanization):
	Organization: Insurance Services Off		organization).
		visory Loss Costs (-5.1% rate impact)	
		and the second second second	

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

DEC 1 9 2006

SPRINGFIELD. ILLINOIS

SUA Insurance Company
Name of Company

Senior Counsel – Compliance Manager
Official - Title

SUMMARY SHEET

12-19-06

Chang	e in Company's premium or rate leve	el produced by rate revision effective	Earliest Date Upon Approval
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger	:	
	Commercial	368, 857	-6.7%
2.	Automobile Physical Damage Private Passenger		
	Commercial	73,097	-6.7%
3.	Liability Other Than Auto	******	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f No.	iling only apply to certain territory (territories) or certain classes? If so, speci	fy:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Rating Organization: Insurance Services Office, Inc. (ISO) CA-2006-RZRLC, Revised Loss Costs For Zone-Rated Coverages (-6.7 rate impact)

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR DEC 19 2006 H29219D SPRINGFIELD. ILLINOIS SUA Insurance Company

Name of Company

Senior Counsel - Compliance Manager Official - Title